VENOUS ABLATION

What is Venous Ablation?

Venous Ablation is a minimally invasive treatment that uses radiofrequency to cauterize or burn and close abnormally enlarged veins in the legs. It is an alternative to traditional vein stripping for patients with superficial venous reflux, an underlying cause of varicose veins.

Normally, blood circulates from the heart to the legs via the arteries and back to the heart through the veins. Veins contain one-way valves which allow blood to return from the legs. If the valves leak, blood can pool in the veins, causing them to become enlarged or varicose. Venous ablation is an image-guided procedure that uses heat generated by radiofrequency to seal off these faulty vessels, diverting blood flow to healthy veins.

The venous ablation procedure is conveniently performed in our office. The goals of treatment are to reduce symptoms, such as aching, swelling, skin irritation and discoloration, and to reduce the risk of complications from venous disease such as ulcerations and blood clots.

Pre-Procedure Instructions

- Increase your fluid intake 24 hours prior to your procedure
- Eat a light breakfast the morning of your procedure. Drink at least 1-2 glasses of water the morning of the procedure.
- You should wear comfortable, loose-fitting clothing. All clothing and jewelry will have to be removed in the area being examined prior to the procedure. You may be asked to wear a gown during the procedure.
- Arrange for someone to drive you to and from the procedure.
- Be sure to have your pre-procedure ultrasound scheduled prior to your procedure; and your follow up ultrasound 2-5 days after your procedure.
- If applicable, take your prescribed dosage of Valium approximately 1 hour prior to procedure appointment time. Bring the medication bottle with you to the procedure, where you will be asked to take the second dose.
- Please note that procedure arrival time may be subject to change. Time will be confirmed the day of your pre-ultrasound.
- *** Be sure to fill Valium Rx within 30 days of the issue date ***

How is a Venous Ablation Performed?

The leg being treated will be cleaned, sterilized and draped. Using ultrasound to visualize the enlarged vein, a catheter is inserted through a small incision and positioned within the abnormal vein. A radiofrequency electrode is then inserted through the catheter and advanced to the location of the abnormality. The electrode heats the vessel and seals the incompetent vein shut. This will shrink the faulty vein and cause it to close down. The procedure takes between 45 minutes to 1 hour to complete.
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Post Procedure Instructions

• You may return to normal activities following the procedure.
• Ambulate at frequent intervals, at least 30 minutes daily.
• Do not sit or stand for long periods.
• Refrain from strenuous activities or heavy lifting until follow up appointment with physician.
• Wear a compression bandage for 48-72 hours followed by compression stockings for at least 2-4 weeks.
• Take analgesics as needed per physician’s orders.
• Return for follow-up ultrasound as scheduled.
• Return in 6 months for follow up ultrasound and a follow up with the performing physician.
• Following the ablation procedure, you may notice clear or light pink tinged clear fluid seeping from your puncture site(s). This is rare and is not a cause for concern.

What are the benefits of the procedure?

• No large surgical incision is needed. Only a small incision in the skin that does not have to be stitched closed is required.
• When compared with traditional vein stripping techniques, endovenous vein ablation is more effective, has fewer complications, and is associated with much less pain during recovery.
• Vein ablation is generally complication-free and safe.
• This procedure leaves virtually no scars because catheter placement requires skin openings of only a few millimeters.
• Vein ablation is less invasive than standard surgical procedures.
• Most of the veins treated are effectively invisible 12 months after the procedure.
• Most patients report symptom relief and are able to return to normal daily activities immediately with little or no pain.

What are the complications of the procedure?

• Any procedure where the skin is penetrated carries a risk of infection. The chance of infection requiring antibiotic treatment, however, is less than 1 in 1,000.
• Any procedure that involves placement of a catheter inside a blood vessel carries certain risks. These risks include damage to the blood vessel, bruising or bleeding at the puncture site. Some post-procedure bruising or tenderness may occur, but should be alleviated by using a compression stocking.
• Some instances of thermal (heat) damage to nerves have been reported. This is rare and generally goes away in a short period of time.
• Thrombophlebitis (inflammation of the vein) is not uncommon and may cause pain and redness in the treated area, but generally responds well to non-steroidal anti-inflammatory drugs (NSAIDs).
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